



05-09-05

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Please use a plus sign (+) inside this box →

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number 10/099,924

Filing Date March 14, 2002

First Named Inventor Wettstein et al.

Group Art Unit 1642

Examiner Name A. Harris, Ph.D.

Total Number of Pages in This Submission

11

Attorney Docket Number

1909.03

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Preliminary Amendment
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**Firm  
or  
Individual Name

JAY Z. ZHANG, REG. NO. 44, 003

Signature

Date

MAY 5, 2005

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Express Mail Label No. EV 600562166 US

Typed or printed name

Rachael M. Harris

Signature

Date

May 5, 2005



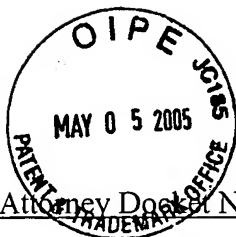
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<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>	
		Application Number	10/099,924
		Filing Date	March 14, 2002
		First Named Inventor	Wettstein et al.
		Examiner Name	A. Harris, Ph.D.
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1642
<b>TOTAL AMOUNT OF PAYMENT (\$)</b>		Attorney Docket No.	1909.03

<b>METHOD OF PAYMENT (check all that apply)</b>					
<input type="checkbox"/> Check <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>50-1627</u> Deposit Account Name: <u>Myriad Genetics, Inc.</u>					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments			
<b>FEE CALCULATION</b>					
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>					
	<b>FILING FEES</b>		<b>SEARCH FEES</b>	<b>EXAMINATION FEES</b>	
	<b>Small Entity</b>		<b>Small Entity</b>	<b>Small Entity</b>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>
Utility	300	150	500	250	200
Reissue	300	150	500	250	600
Provisional	200	100	0	0	0
<b>2. EXCESS CLAIM FEES</b>					
<b>Fee Description</b>				<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>
Each claim over 20 (including Reissues)				50	25
Each independent claim over 3 (including Reissues)				200	100
Multiple dependent claims				360	180
<b>Total Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Due (\$)</b>	<b>Multiple Dependent Claims</b>
11 - 20 or HP = 0		x	50.00	=	0.00
HP = highest number of total claims paid for, if greater than 20.					
<b>Indep. Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Due (\$)</b>	
2 - 3 or HP = 0		x	200.00	=	0.00
HP = highest number of independent claims paid for, if greater than 3.					
<b>3. APPLICATION SIZE FEE</b>					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).					
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Due (\$)</b>
_____ - 100 = _____	/ 50 = _____	(round up to a whole number) x _____		=	_____
<b>4. OTHER FEE(S)</b>					
Non-English Specification, \$230 fee (no small entity discount)				<b>Fees Due (\$)</b>	
Other (e.g., late filing surcharge): _____				_____	

<b>SUBMITTED BY</b>			
Signature		Registration No. 44, 003 (Attorney/Agent)	Telephone 801-584-3600
Name (Print/Type)	Jay Z. Zhang	Date May 5, 2005	

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



Attorney Docket No. 1909.03

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventors: Wettstein et al. )

Application No.: 10/099,924 )

Filed: March 14, 2002 )

For: SURVIVIN-INTERACTING  
PROTEINS AND USE THEREOF )

Group Art Unit: 1642

Examiner: A. Harris, Ph.D.

CERTIFICATE OF EXPRESS MAIL

"Express Mail" mailing label number: EV 600562166 US

Date of Deposit: May 5, 2005

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Rachael M. Harris

5/5/05  
Date

**SUPPLEMENTAL AMENDMENT**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This is a supplemental amendment and response to the Office Action mailed December 2, 2004.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 8 of this paper.